

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

ANNETTE TEIJEIRO FOR CONGRESS

ADDRESS (number and street)

1916 HOUSTON DRIVE

Check if different
than previously
reported. (ACC)

LAS VEGAS

NV

89104

2. FEC IDENTIFICATION NUMBER ▼

C

C00559492

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

NV

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the
State of

5. Covering Period

M M /

07

D D /

01

Y Y Y Y

2014

through

M M /

09

D D /

30

Y Y Y Y

2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ANNETTE TEIJEIRO

Signature of Treasurer

ANNETTE TEIJEIRO

[Electronically Filed]

Date

M M /

10

D D /

23

Y Y Y Y

2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

Write or Type Committee Name

ANNETTE TEIJEIRO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	10987.91	48054.69
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	10987.91	48054.69
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	11061.28	47491.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	11061.28	47491.57
8. Cash on Hand at Close of Reporting Period (from Line 27).....	103587.27	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	103024.15	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 24

Write or Type Committee Name

ANNETTE TEIJEIRO FOR CONGRESS

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 / 01 / 2014

To:

M M / D D / Y Y Y Y
09 / 30 / 2014

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

7645.71

38721.71

(ii) Unitemized

3342.20

9332.98

(iii) TOTAL of contributions from individuals ▶

10987.91

48054.69

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs)

0.00

0.00

(d) The Candidate

0.00

0.00

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))..

10987.91

48054.69

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

103024.15

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

103024.15

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS

(Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)..... ▶

10987.91

151078.84

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 24

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11061.28	47491.57
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	11061.28	47491.57

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	103660.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10987.91
25. SUBTOTAL (add Line 23 and Line 24).....	114648.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	11061.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	103587.27

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Heather Allen

Mailing Address 5835 Calle de Honra

City

Las Vegas

State

NV

Zip Code

89120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Comprehensive Cancer Centers

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		08		2014

Transaction ID : SA11AI.4769

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

702.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2014

Transaction ID : SA11AI.4600

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For:

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

742.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		12		2014

Transaction ID : SA11AI.4601

Amount of Each Receipt this Period

40.00

Cash Jar

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

560.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 24
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ANNETTE TEIJEIRO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Anonymous Anonymous			Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2014	
Mailing Address Anonymous			Transaction ID : SA11AI.4602	
City	State	Zip Code	Amount of Each Receipt this Period _____ 45.00	
Las Vegas	NV	89118		
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Anonymous		Occupation Anonymous		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 787.78		
B. Full Name (Last, First, Middle Initial) Anonymous Anonymous			Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2014	
Mailing Address Anonymous			Transaction ID : SA11AI.4670	
City	State	Zip Code	Amount of Each Receipt this Period _____ 43.00	
Las Vegas	NV	89118		
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Anonymous		Occupation Anonymous		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 830.78	Cash	
C. Full Name (Last, First, Middle Initial) Anonymous Anonymous			Date of Receipt M M / D D / Y Y Y Y 08 / 09 / 2014	
Mailing Address Anonymous			Transaction ID : SA11AI.4603	
City	State	Zip Code	Amount of Each Receipt this Period _____ 35.00	
Las Vegas	NV	89118		
FEC ID number of contributing federal political committee.		C _____		
Name of Employer Anonymous		Occupation Anonymous		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 865.78	Cash Jar	
SUBTOTAL of Receipts This Page (optional).....			_____ 123.00	
TOTAL This Period (last page this line number only).....			_____	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

A.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

892.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		09		2014

Transaction ID : SA11AI.4671

Amount of Each Receipt this Period

27.00

Cash

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

B.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

897.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		13		2014

Transaction ID : SA11AI.4673

Amount of Each Receipt this Period

5.00

Cash

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

C.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

926.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		14		2014

Transaction ID : SA11AI.4674

Amount of Each Receipt this Period

29.00

Cash

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

61.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 8 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

A.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

969.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2014

Transaction ID : SA11AI.4675

Amount of Each Receipt this Period

43.00

Cash

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

B.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1007.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2014

Transaction ID : SA11AI.4679

Amount of Each Receipt this Period

38.00

Cash

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

C.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1044.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		22		2014

Transaction ID : SA11AI.4680

Amount of Each Receipt this Period

37.00

Cash

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

118.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 9 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

A.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1089.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

Transaction ID : SA11AI.4599

Amount of Each Receipt this Period

45.00

Cash jar

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

B.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1138.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		17		2014

Transaction ID : SA11AI.4596

Amount of Each Receipt this Period

48.71

Cash

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

C.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1178.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

Transaction ID : SA11AI.4655

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

133.71

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

A.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1188.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		21		2014

Transaction ID : SA11AI.4663

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

Anonymous Anonymous

B.

Mailing Address Anonymous

City

Las Vegas

State

NV

Zip Code

89118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Anonymous

Occupation

Anonymous

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1228.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		24		2014

Transaction ID : SA11AI.4598

Amount of Each Receipt this Period

40.00

Cash Jar

Full Name (Last, First, Middle Initial)

Gary Cantor

C.

Mailing Address 2816 Vista Del Sol

City

Las Vegas

State

NV

Zip Code

89120

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		02		2014

Transaction ID : SA11AI.4784

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 11 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Paul Chao

A.

Mailing Address 1933 Grey Eagle St

City

Henderson

State

NV

Zip Code

89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Desert Inn Women's Care

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.4594

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Paul Chao

B.

Mailing Address 1933 Grey Eagle St

City

Henderson

State

NV

Zip Code

89074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Desert Inn Women's Care

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2014

Transaction ID : SA11AI.4662

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Alex DeCastroverde

C.

Mailing Address 3005 WindySurf Court

City

Las Vegas

State

NV

Zip Code

89128

FEC ID number of contributing
federal political committee.

C

Name of Employer

Decastroverde Law

Occupation

Attorney

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2014

Transaction ID : SA11AI.4801

Amount of Each Receipt this Period

750.00

SUBTOTAL of Receipts This Page (optional).....

1250.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Ivan Goldsmith

Mailing Address 5375 S. Fort Apache

#103

City

Las Vegas

State

NV

Zip Code

89148

FEC ID number of contributing
federal political committee.

C

Name of Employer

TrimCare

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		21		2014

Transaction ID : SA11AI.4590

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Joanne Heins

Mailing Address 398 Otsego Court

City

Henderson

State

NV

Zip Code

89012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Certified R.N. Anesthesist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		07		2014

Transaction ID : SA11AI.4773

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Christopher Hisgen

Mailing Address 848 N. Rainbow Blvd #2408

City

Las Vegas

State

NV

Zip Code

89107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		26		2014

Transaction ID : SA11AI.4788

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 13 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Sandra Mallin

Mailing Address 3025 Lullingstone St.

City

Las Vegas

State

NV

Zip Code

89135

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2014

Transaction ID : SA11AI.4681

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

James Manning

Mailing Address 9728 Verlaine Court

City

Las Vegas

State

NV

Zip Code

89145

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bone and Joint Specialists

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2014

Transaction ID : SA11AI.4718

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Robert McBeath

Mailing Address 9600 Grand Isle Ln

City

Las Vegas

State

NV

Zip Code

89144

FEC ID number of contributing
federal political committee.

C

Name of Employer

Optum

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		27		2014

Transaction ID : SA11AI.4740

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 14 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sam Palermo

Mailing Address 2096 Mountain City St.

City

Henderson

State

NV

Zip Code

89052

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.4582

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Linda Sanders

Mailing Address 2105 E. Alexander Rd.

City

North Las Vegas

State

NV

Zip Code

89131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self

Occupation

Kennel Operator/Owner

Receipt For: 2014

☒ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11AI.4584

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. David Steinberg

Mailing Address 7301 Peak Dr

City

Las Vegas

State

NV

Zip Code

89128

FEC ID number of contributing
federal political committee.

C

Name of Employer

SDMI

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2014

Transaction ID : SA11AI.4751

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 15 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Lynn Thornhill

Mailing Address 1305 Radwick Dr.

City

Las Vegas

State

NV

Zip Code

89110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		27		2014

Transaction ID : SA11AI.4581

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

Antonia Turner

Mailing Address 9065 Herrera Ave.

City

Las Vegas

State

NV

Zip Code

89129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Independent contractor

Occupation

Certified Registered Nurse A

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		19		2014

Transaction ID : SA11AI.4790

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

William VonTobel

Mailing Address 5 Isleworth Dr.

City

Henderson

State

NV

Zip Code

89052

FEC ID number of contributing
federal political committee.

C

Name of Employer

HPN

Occupation

Physician

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		19		2014

Transaction ID : SA11AI.4658

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 16 OF 24

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Scott Young

Mailing Address 7326 W. Cheyenne Ave

City

Las Vegas

State

NV

Zip Code

89129

FEC ID number of contributing
federal political committee.

C

Name of Employer

S. Young DO Ltd

Occupation

Anesthesiologist

Receipt For: 2014

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2014

Transaction ID : SA11Al.4660

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)
☐ General

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

7645.71

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Battleground LLC

Mailing Address 3305 N. Jones

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2014

City	State	Zip Code
Las Vegas	NV	89108

Purpose of Disbursement
Call System

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

2450.00

Transaction ID : SB17.4697

B. Battleground LLC

Mailing Address 3305 N. Jones

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		30		2014

City	State	Zip Code
Las Vegas	NV	89108

Purpose of Disbursement
Call System

006

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.4703

c. Battleground LLC

Mailing Address 3305 N. Jones

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

City	State	Zip Code
Las Vegas	NV	89108

Purpose of Disbursement
Call System

001

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Amount of Each Disbursement this Period

520.00

Transaction ID : SB17.4705

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2450.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Body Lan. Succ.

Mailing Address 82 Magical Mystery

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2014

City	State	Zip Code
Henderson	NV	89074

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
Consultant

001

Transaction ID : SB17.4687

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. Century Link

Mailing Address 1321 W. Sunset Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		19		2014

City	State	Zip Code
Henderson	NV	89014

Amount of Each Disbursement this Period

100.92

Purpose of Disbursement

001

Transaction ID : SB17.4690

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

c. Century Link

Mailing Address 1321 W. Sunset Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2014

City	State	Zip Code
Henderson	NV	89014

Amount of Each Disbursement this Period

102.50

Purpose of Disbursement
Telephone Service

001

Transaction ID : SB17.4701

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2703.42

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 24

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Costco

Mailing Address 1000 Mark St

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 10 / 2014

Amount of Each Disbursement this Period

164.55

Transaction ID : SB17.4696

B. Costco

Mailing Address 1000 Mark St

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Office Supplies

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 29 / 2014

Amount of Each Disbursement this Period

131.55

Transaction ID : SB17.4702

C. Costco

Mailing Address 1000 Mark St

City Las Vegas State NV Zip Code 89104

Purpose of Disbursement
Food for Fundraiser

007

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2014

Amount of Each Disbursement this Period

120.04

Transaction ID : SB17.4709

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

416.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Over the River LLC

Mailing Address 801 S. Rancho Dr.

City	State	Zip Code
Las Vegas	NV	89106

Purpose of Disbursement

006

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2014

Amount of Each Disbursement this Period

761.89

Transaction ID : SB17.4682

B. Over the River LLC

Mailing Address 801 S. Rancho Dr.

City	State	Zip Code
Las Vegas	NV	89106

Purpose of Disbursement

006

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2014

Amount of Each Disbursement this Period

157.50

Transaction ID : SB17.4707

c. Over the River LLC

Mailing Address 801 S. Rancho Dr.

City	State	Zip Code
Las Vegas	NV	89106

Purpose of Disbursement
Printing

006

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		26		2014

Amount of Each Disbursement this Period

2006.48

Transaction ID : SB17.4708

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2925.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 24

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

ANNETTE TEIJEIRO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Package Printing

Mailing Address 1725 S. Rainbow Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2014

City	State	Zip Code
Las Vegas	NV	89146

Purpose of Disbursement
Printed materials

006

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

1404.22

Transaction ID : SB17.4706

B. Pay Pal

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2014

City	State	Zip Code

Purpose of Disbursement

001

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

193.24

Transaction ID : SB17.4809

c. Republican Women Southern Nevada PAC

Mailing Address 8940 W Washburn Rd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2014

City	State	Zip Code
Las Vegas	NV	89149

Purpose of Disbursement

004

Category/
Type

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.4736

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1897.46

10392.89

SCHEDULE C (FEC Form 3)
LOANS

PAGE 22 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4303

ANNETTE TEIJEIRO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2014

ANNETTE TEIJEIRO

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

2991.89

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

2991.89

TERMS

Date Incurred

M M / D D / Y Y Y Y
11 / 01 / 2013

Date Due

M M / D D / Y Y Y Y
/ / 2018

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

2991.89

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

PAGE 23 OF 24

Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4304

ANNETTE TEIJEIRO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

ANNETTE TEIJEIRO

[PERSONAL FUNDS]

Election: 2014

☒ Primary☐ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 03 / D 31 / Y 2014 Y

Date Due

M M / D D / Y 2018 Y

Interest Rate

0.00 % (apr)

Secured:

☐ Yes ☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

100000.00

TOTALS This Period (last page in this line only)..... ►

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANSUse separate schedule(s)
for each category of the
Detailed Summary Page

PAGE 24 OF 24

FOR LINE NUMBER:
(check only one)☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4566

ANNETTE TEIJEIRO FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

ANNETTE TEIJEIRO

Election: 2014

☐ Primary☒ General☐ Other (specify) ▼

Mailing Address

1916 HOUSTON DRIVE

City

State

ZIP Code

LAS VEGAS

NV

89104

Original Amount of Loan

32.26

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

32.26

TERMS

Date Incurred

M M / D D / Y Y Y Y
06 / 12 / 2014

Date Due

M M / D D / Y Y Y Y

Interest Rate

% (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

32.26

TOTALS This Period (last page in this line only)..... ►

103024.15

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.